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1644,\$1

SEAR TO THE REAL PROPERTY OF THE PERTY OF TH	Application Number	09/476,485			
TRANSMITTAL	Filing Date	12/30/1999			
FORM	First Named Inventor	M. Gabriella Colucci			
(to be used for all correspondence after initial	(filing) Art Unit	1644			
	Examiner Name	M.A. Belyavskyi			
Total Number of Pages in This Submission	554 Attorney Docket Number	108236.119			
	ENCLOSURES (Check all that	apply)			
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Addrest Terminal Disclaimer Request for Refund CD, Number of CD(s) Remarks	After Allowance communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): - Postcard			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Signature $N_7 \mathcal{U} + \lambda$:	LLP et, Boston, MA 02109	gistration No. 43,545			
Date 09/11/2003					
C	ERTIFICATE OF TRANSMISSION/	MAILING			
		deposited with the United States Postal Service with ents, P.O. Box 1450, Alexandria, VA 22313-1450 on			
Typed or printed name	or printed name Rochelle Harper Greenidge				
Signature Parkelle Harper Greenidge		Date 09/11/2003			

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

465.00 (\$)

Complete if Known		
Application Number	09/476,485	
Filing Date	12/30/1999	
First Named Inventor	M. Gabriella Colucci	
Examiner Name	M.A. Belyavskyi	
Art Unit	1644	
Attorney Docket No.	108236.119	

Number Deposit Account Name The Commissioner is authorized to: (check all that apply) 1051 130 2051 65 Surcharge - late filling fee or cath Name The Commissioner is authorized to: (check all that apply) 1812 2,520 1	METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
Deposit Account Deposit Account Number Deposit Hale and Dorr LLP Name The Commissioner is authorized to: (check ail that apply) Charge fee(s) indicated below Credit any overpayments Credit any overp	Check Credit card Money Other None	3. ADDITIONAL FEES			
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1. BASIC FILING FEE 125					
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1205 18 2205 9 ** Reissue claims in excess of 20 1802 900 1802 900 Request for expedited examination of a design application					
SUBTOTAL (2) (\$) 0.00 Other fee (specify)	SUBTOTAL (2) (\$) 0.00	Other fee (specify)			
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SUBMITTED BY (Complete (if applicable) Registration No. Telephone (617) 526-6048 Nancy (Chiu) Wilker Name (Print/Type) 43,545 12: Signature 09/11/2003

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